Department of the Treasury

U.S. Fiduciary Income Tax Return For the calendar year 1987 or fiscal year

	OMB No. 1545-0092						
	1987						
ification number							

internal Revenue Service beginning , 1987, and ending , 19							
		licable boxes: nt's estate	Name of estate or trust (grantor type trust, see	instructions)		Employe	r identification number
	Simple t					D.1	14
_	Complex		Name and title of fiduciary			Date ent	ity created
=	•	type trust					
=		otcy estate	Address of fiduciary (number and street)				npt charitable and split-interest
		estate trust				instruction	neck applicable boxes (see
		ncome fund	City, state, and ZIP code				cribed in section 4947(a)(1)
	Initial re		,			l	
\square	Amende	ed return					a private foundation
	Final ret	turn	Check if this is for a short taxable ye	ar under s	ection 645 ►	L] L Des	cribed in section 4947(a)(2)
	1 1	Dividends					1
	2	nterest income					2
	1		s) from partnerships, other estates or c	thar tructo	(see instructions)		3
ā	-	•	alty income (or loss) (attach Schedule l				
Income	1	•					5
ဋ	1		I farm income (or loss) (attach Schedu				
=	6 (Capital gain (or lo	oss) (attach Schedule D (Form 1041))				6
	7 (Ordinary gain (or	loss) (attach Form 4797)				7
	8	Other income (sta	ate nature of income)				8
	9	Total incom	ne (add lines 1 through 8)				9
	10						
	1				' ' '		7//////
	1	-			• • • •		
			ction (from Schedule A, line 6)				<i>₹//////</i> }
S	13 /	-	itant, and return preparer fees		1 1		- <i>V//////</i>
0	14 (Other deductions	s (including taxes) (attach schedule)		14		
cti	15	Total (add l	lines 10 through 14)				15
p	16 /		come (or loss) (subtract line 15 from li				
Deductions	17	•	ion deduction (from Schedule B, line 1				17
			tion (including generation-skipping tra				18
	1						19
	1						20
	20		lines 17 through 19) of fiduciary (subtract line 20 from line				
$\overline{}$				21			
			te schedule or \square Schedule D				
	23 (Credits: a For	23c				
ē	24 (Credits: 🗌 Form	1 3800 □ Form 3468 □ Form 5884	□ Form	6478	65 🗆 Form 8586	24
oney order here	25	Total (add	lines 23c and 24)				25
de	26 I	Balance (subtrac	26				
ō	27 [Recapture of inve	27				
5	٠,	Alternative minim	28				
ê,	5 20 /		29				
0	29		lines 26 through 28)				
Please attach check or m	ات		2439; b Form 4136			; rotal ▶	
Ę,	31 1	Payments: a 198	87 estimated tax payments ▶		•••••		
된	<u> </u>		n of time to file (attach Form 2758) ▶				
tta	32		lines 30d and 31d)				32
e a	33 I	Balance of tax d	l ue (subtract line 32 from line 29) (see	instructio	ns)		33
eas			ubtract line 29 from line 32)				34
≖		Amount of line 34	<i>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</i>				
			by trust beneficiaries (Attach Form 1				
			Form 2210 (2210F) is attached (see i				
		Under penalties	of perury. I declare that I have examined this re	turn includir	g accompanying schedu	les and statements, an	d to the best of my knowledge and
	ease	belief, it is true, correct, and complete. Declaration of preparer (other than fiduciary) is based on all information of which prepare					rer has any knowledge.
Si	gn		<u> </u>				
He			Signature of fiduciary or officer representing fiduciary Date				
		' Signature of	Triduciary or officer representing fiduciary	,	D-4-	Date	15
D-:	d	Preparer's			Date	Check if	Preparer's social security no.
Paid Preparer's Use Only		signature				self-employed ▶ □	
		Firm's name (or yours if self-emp					:
		and address	noyeu)			ZIP code ►	
_		<u> </u>	· · · · · · · · · · · · · · · · · · ·				

Forr	n 1041 (1987)		Page 2				
SC	CHEDULE A.—Charitable Deduction—Do not complete for a simple trust or a pooled income (Write the name and address of each charitable organization to whom your contribution an attached sheet.)		000 or more				
1	Amounts paid or permanently set aside for charitable purposes from current year's gross income	1					
2	Tax-exempt interest allocable to charitable distribution (see instructions)	2					
3	Balance (subtract line 2 from line 1)	3					
	Enter the net short-term capital gain and the net long-term capital gain of the current tax year allocable to corpus paid or permanently set aside for charitable purposes	4					
5	Amounts paid or permanently set aside for charitable purposes from gross income of a prior year (see instructions)	5					
6	Total (add lines 3, 4, and 5). Enter here and on page 1, line 12	6					
	CHEDULE B.—Income Distribution Deduction						
		_					
	Adjusted total income (Enter amount from page 1, line 16.) (If net loss, enter zero.)	1					
	Adjusted tax-exempt interest (see instructions)	2					
	Net gain shown on Schedule D (Form 1041), line 17, column (a) (If net loss, enter zero.)	3 4					
	Enter amount from Schedule A, line 4	5					
	Long-term capital gain included on Schedule A, line 1						
	Short-term capital gain included on Schedule A, line 1	7					
	If the amount on page 1, line 6, is a capital loss, enter here as a positive figure						
	If the amount on page 1, line 6, is a capital gain, enter here as a negative figure	9					
	Distributable net income (combine lines 1 through 8)						
	If a complex trust, amount of income for the tax year determined under the governing instrument (accounting income)						
	Amount of income required to be distributed currently (see instructions)	11					
	Other amounts paid, credited, or otherwise required to be distributed (see instructions)	12					
	Total distributions (add lines 11 and 12). (If greater than line 10, see instructions.)	13					
	Enter the total amount of tax-exempt income included on line 13	14	 				
	Tentative income distribution deduction (subtract line 14 from line 13)	15					
	Tentative income distribution deduction (subtract line 2 from line 9)	16					
_	Income distribution deduction (Enter the smaller of line 15 or line 16 here and on page 1, line 17.)	17					
	If the fiduciary's name or address has changed, enter the old information ▶		Yes No				
			YIIIIIIXIIIIIII				
2	2 Did the estate or trust receive tax-exempt income? (If "Yes," attach a computation of the allocation of expenses.) Enter the amount of tax-exempt interest income ►						
3	B Did the estate or trust have any passive activity loss(es)? (If "Yes," enter the amount of any such loss(es) on Form 8582, Passive Activity Loss Limitations, to figure the allowable loss.)						
4	Did the estate or trust receive all or any part of the earnings (salary, wages, and other compensation) of any individual by reason of a contract assignment or similar arrangement?						
5	At any time during the tax year, did the estate or trust have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? (See the Instructions for exceptions and filing requirements for Form TD F 90-22.1						
6	Was the estate or trust the grantor of, or transferor to, a foreign trust which existed during the current tax year, whether or not the estate or trust has any beneficial interest in it? (If "Yes," you may have to file Form 3520, 3520-A, or 926.)						
8 9	Check this box if this entity has filed or is required to file Form 8264 , Application for Registration of a Tax She Check this box if this entity is a complex trust making the section 663(b) election	▶□					